PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 Dave 2											201	
Effective October 1, 2003 Dage 2									0116	<u> </u>	1201	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OF		R THAN . ENTITY
T	OTAL CLAIMS	\$	T	·				RATE	FEE	٦	RATE	FEE
FC	DR		NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FI	Œ 385.00	OB	BASIC FEI	
TO	OTAL CHARGE	ABLE CLAIMS	26 minus 20=		. [XS 9=	1	OR		
INI	DEPENDENT C	CLAIMS	3.	3 . minus 3 =		· %		X43=	┧──	7	Voc	 -
MU	JLTIPLE DEPE	NDENT CLAIM I	PRESENT	RESENT					-	JOR	X86=	ļ
• 11	the difference	e in column 1 is	less than zero, enter 10°			column 2		+145=	<u> </u>	OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II								TOTAL	<u> </u>	OR	TOTAL	
ŀ	-6-06	(Column 1)	AMICNUE	(Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER SMALL:	
AMENDMENT A	D	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	. 5	Minus	- 21)	= 0/		X\$ 9=	1	OR	X\$18=	. FEE
	Independent	-	Minus	 3		= 0	ı	X43=		OR	X86=	
	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		I	+145=			+290=	
				•	•	•	L	TOTAL		OR	TOTAL	-
(Column 1) (Column 2) (Column 3)								DOIT. FEE	<u> </u>	OR,	VOOIT, FEEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ist er Usly	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	44		-		X\$ 9=		OR:	X\$18=	
	Ind pendent		Minus	***		=	t	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							T	+145=	·	OR	+290=	
							AI	TOTAL DOIT, FEE		OR ,	TOTAL DOIT, FEE	
			-	•								
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID F	er Isly	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	et		e		X\$ 9=	·	OR	X\$18×	-
	Independent	ESENTATION OF MULTIPLE DEPENDENT CL		24.4555	Ε		X43=		OR	X86=		
	THIS I THE SET AT THE OF MOUTH PLE DEPENDENT CLAIM										+290=	
- H	* If the intry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR L	10TAL	
	l the "Highest No	mber Previously Pa	iid For IN THI	S SPACE is I	less that	n 3, erner "20." - n 3, erner "3."	` A0	DOTT. FEE		OR A	DOTT. FEEL	